Seven Elements Self-Assessment

Twenty questions for your next compliance committee or board meeting. Answer honestly; nobody is grading this but you.

A CareCompli resource for skilled nursing and assisted living facilities

How to use this assessment

Federal guidance evaluates compliance programs against seven elements. These twenty questions translate those elements into the practical tests a reviewer would apply. Answer yes only if you could prove it with documents today.

Policies

- ☐ **1.** Have your compliance policies been reviewed or updated within the past year? Yes / No
- ☐ **2.** Could you show which staff acknowledged the current version of each key policy? Yes / No
- ☐ **3.** Do your policies reflect your state's requirements, not just federal ones? Yes / No

Compliance officer and committee

- ☐ **4.** Does your facility have a formally designated compliance officer? Yes / No
- ☐ **5.** Has your compliance committee met, with minutes, in the past quarter? Yes / No
- ☐ **6.** Has compliance been reported to your governing body in the past quarter, and is that documented? Yes / No

Training

- ☐ **7.** Could you produce a current training completion report by role, today? Yes / No
- ☐ **8.** Does every new hire receive compliance training during onboarding, with a record? Yes / No
- ☐ **9.** When an incident or audit reveals a gap, does targeted retraining follow, and is it documented? Yes / No

Communication

- ☐ **10.** Can staff report concerns anonymously, and do they know how? Yes / No
- ☐ **11.** Is every report logged, tracked, and closed with a documented outcome? Yes / No
- ☐ **12.** Would your staff say, if asked privately, that reporting is safe from retaliation? Yes / No

Auditing and monitoring

- ☐ **13.** Do you have a written audit schedule for the year, and is it on track? Yes / No
- ☐ **14.** Have your highest-risk areas been audited within the past twelve months? Yes / No
- ☐ **15.** Has your compliance program's overall effectiveness been reviewed in the past year? Yes / No

Discipline

- ☐ **16.** Are consequences for compliance violations written, communicated, and known to staff? Yes / No
- ☐ **17.** Have they been applied consistently, including at leadership levels? Yes / No

Response and correction

- ☐ **18.** Is every reported concern investigated with a documented file: steps, findings, resolution? Yes / No
- ☐ **19.** Do corrective actions have named owners and deadlines, and are they tracked to completion? Yes / No
- ☐ **20.** When reporting to a state or federal agency is required, do you have a way to know the deadline, and proof you have met it? Yes / No

Scoring

17 to 20 yes: Your program has real bones. The test is whether it stays this way between reviews.

12 to 16 yes: Solid foundation, meaningful gaps. Your no answers are your priority list.

Under 12: Your program may exist more on paper than in practice, and reviewers are specifically trained to tell the difference. Start with Elements 2 and 7: ownership and response are where programs most often fail.

> ***Where to start:*** *Wherever you answered no, that is where to start. Or where to call us.*

How CareCompli answers this

Every no on this assessment maps to something the portal makes routine.

What this document asks of you	In the CareCompli portal
Questions 1 to 3: policy currency and acknowledgment	Version history, review dates, and per-person acknowledgment tracking are automatic.
Questions 4 to 6: committee and board evidence	Committee follow-ups are tracked tasks; board reporting is generated from live program data and acknowledged by emailed link.
Questions 7 to 9: training proof on demand	Completion by role is a live report; new hires get their role's training path automatically; retraining is assigned and tracked.
Questions 10 to 12: reports that go somewhere	Every report is logged, assigned, and tracked to a documented outcome the moment it arrives, with anonymous options.
Questions 13 to 15: audits on schedule	Structured audits run through the portal on their schedule, and findings convert into tracked corrective action.
Questions 18 to 20: response and deadlines	Investigation files build themselves as work happens; reporting deadlines are computed at intake with the record to prove they were met.

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